

**North Carolina Division of Mental Health,
Developmental Disabilities and
Substance Abuse Services**

**Complaints Received By
Local Management Entities**

**State Fiscal Year 2008-2009
Quarter 1**

May 19, 2009

Prepared by

**Customer Service and Community Rights Team
Advocacy and Customer Service Section**

Executive Summary

North Carolina Administrative Code (10A NCAC 26G.7001-7003) requires that all Mental Health, Developmental Disabilities and Substance Abuse Local Management Entities (LMEs) utilize standardized complaint response and complaint reporting procedures regarding services provided in their catchment areas. These rules state that LMEs are required to receive, review, respond to and report complaints regarding any mental health, developmental disability and/or substance abuse service. This requirement includes complaints regarding all facilities licensed under NC General Statute 122C-Article 2 (except hospitals), unlicensed community-based services and LME services. For the purpose of this report and LME data collection, we define *complaints* as “any expression of dissatisfaction.”

This report includes aggregate statewide data and does not include data for each individual LME¹. It is difficult to interpret with certainty the reasons for variability in complaint rates among LMEs. A higher number of complaints may be a result, for example, of increased education for consumers, families and providers about consumer rights, the complaint rule and/or empowerment efforts to encourage the reporting and resolution of complaints. In fact, it is expected that aggregate data in future reports will likely show increases in the number of complaints reported to the LMEs due to public awareness and consumer education activities. Therefore, any LME data comparisons would be problematic. LMEs possess data relevant to their own catchment areas and should use this data to identify trends that might inform quality management activities.

The complaint data is utilized at the LME level to inform management of trends that may justify further action or indicate an issue in their catchment area. Many LMEs report that they use their data tracking system to inform their Client Rights Committees, Board of Directors, Quality Management and Area Directors to ensure an expedient response to potential areas of concern. LMEs look at complaint patterns to identify opportunities for quality improvement and provide technical assistance when needed to ensure that appropriate action is being taken. For example, LME staff may initiate an investigation or a provider review as a result of an individual complaint. Importantly, LMEs also provide this information to local Consumer Family Advisory Committees (CFACs).

State Fiscal Year (SFY) 08-09 1st Quarter Complaint Data Highlights:

- A total of 1,345 complaints were made to LMEs between July 1, 2008 and September 30, 2008 and the average rate of complaints reported was 5.83 per 1,000 active caseload². One thousand and eighty nine (81%) of the complaints

¹ LME data is available upon request. Please contact Stuart Berde at (919) 715-3197 or Stuart.Berde@ncmail.net.

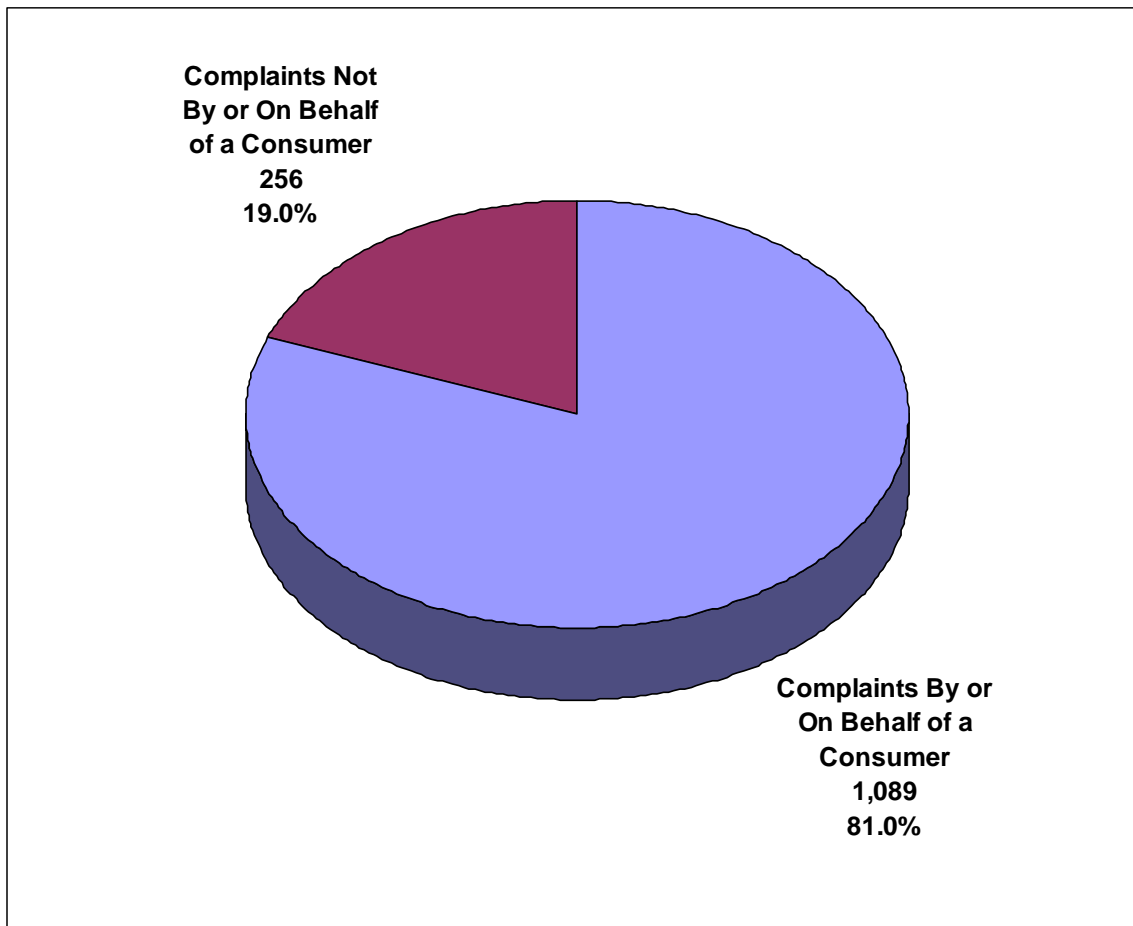
² The Active Caseload for the quarter is the average of the active caseload for each of the three individual months during the quarter. The active caseload for the month is calculated by performing a distinct count of client IDs in the Client Data Warehouse (CDW) with an “active” status code that were admitted prior to the end of the month and includes consumers who were discharged during the month.

received were by or on-behalf of a consumer and 256 (19%) of the complaints received were not by or on behalf of a consumer because they did not directly involve a particular individual.

- Consumers (325) and parents/guardians (318) each made 24 % of the total number of complaints during this quarter, accounting for almost half of the complaints reported statewide. Providers initiated 229 (17%) of the complaints.
- Six hundred and sixty two (61%) of the 1,089 complaints related to consumers were filed regarding an adult and 345 (32%) were by or on behalf of a child or adolescent. Five hundred and forty seven (50%) of the consumers involved had a mental health diagnosis, 238 (22%) had a developmental disability diagnosis and 161 (15%) had multiple disabilities.
- Four hundred and thirty five (32%) of the complaints involved quality of care issues. Access to services (170), authorization/payment/billing issues (170) and other issues (176) each accounted for 13% of the complaints this quarter.
- During the first quarter of FY 2008 – 2009, Community Support-Adult services received 274 (20%) of the total complaints and Community Support-Child received 179 (13%) of the total complaints.
- Two hundred fifty four (19%) of the complaints resulted in an investigation by the LME, DHSR, DSS or DMH/DD/SAS.
- Of the 254 complaint investigations that took place, 100 (39%) were not substantiated, 89 (35%) were substantiated and 65 (26%) were partially substantiated.
- One hundred and fourteen (45%) of the complaints that were investigated required no further action, 75 (29%) required a corrective action plan and 65 (26%) resulted in recommendations to the provider.
- One thousand two hundred and ninety one (96%) of the total complaints this quarter were resolved.
- One thousand and ninety one (81%) of the complaints this quarter did not require an investigation. Of these, 623 (57%) were resolved by working with the provider, 269 (25%) were resolved by providing technical assistance to complainants and 152 (14%) were resolved by mediation.
- The final dispositions for 1,294 (96%) of the complaints occurred at the LME level.
- One thousand two hundred and fourteen (90%) of the complaints this quarter were resolved within 30 days of receipt of the complaint.

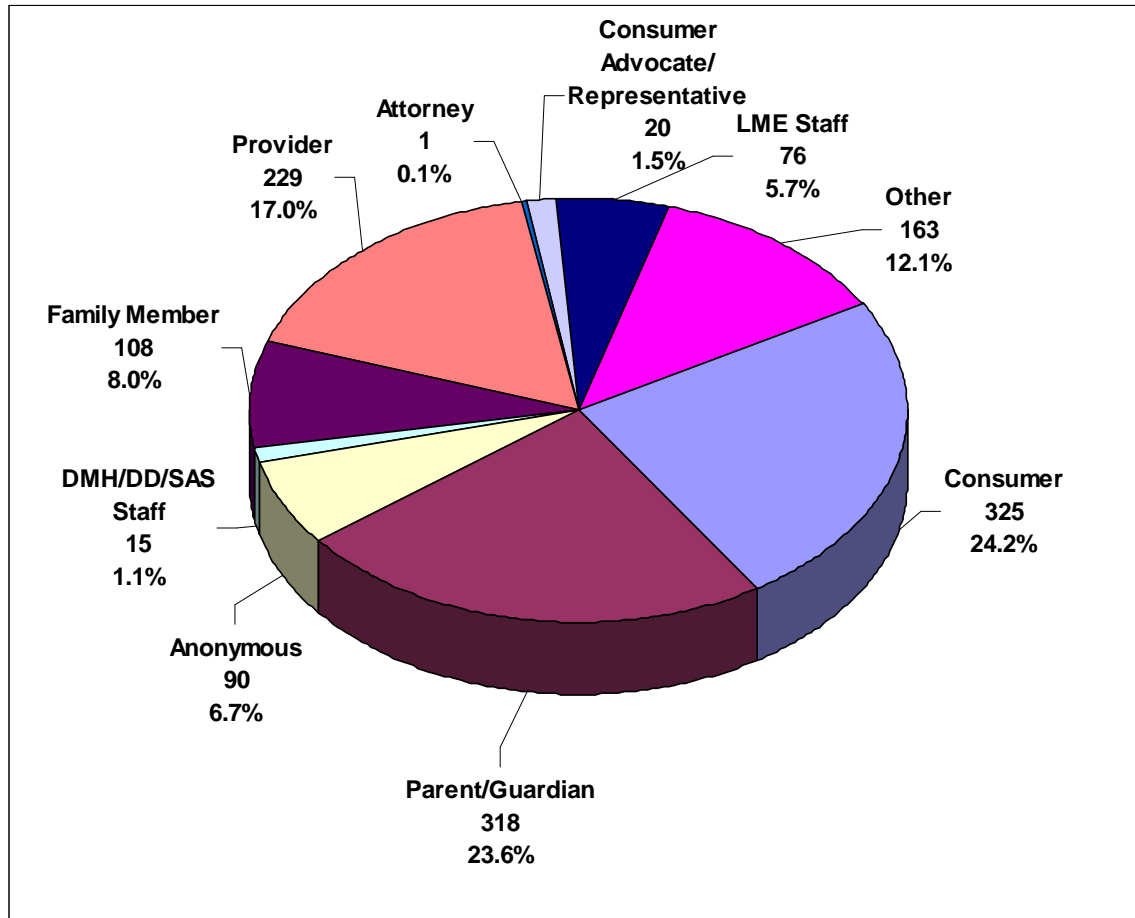
Total Number of Complaints

LMEs received a total of 1,345 complaints from July 1, 2008 to September 30, 2008. One thousand and eighty nine (81%) of the complaints received were by or on behalf of a consumer and 256 (19%) involved administrative issues, billing issues and personnel issues. The statewide average rate of complaints received by LMEs for this period was 5.83 complaints per 1,000 active consumers. The Active Caseload for the quarter is the average of the active caseload for each of the three individual months during the quarter. The active caseload for the month is calculated by performing a distinct count of clients' IDs in the Client Data Warehouse (CDW) with an "active" status code that were admitted prior to the end of the month and includes consumers who were discharged during the month.



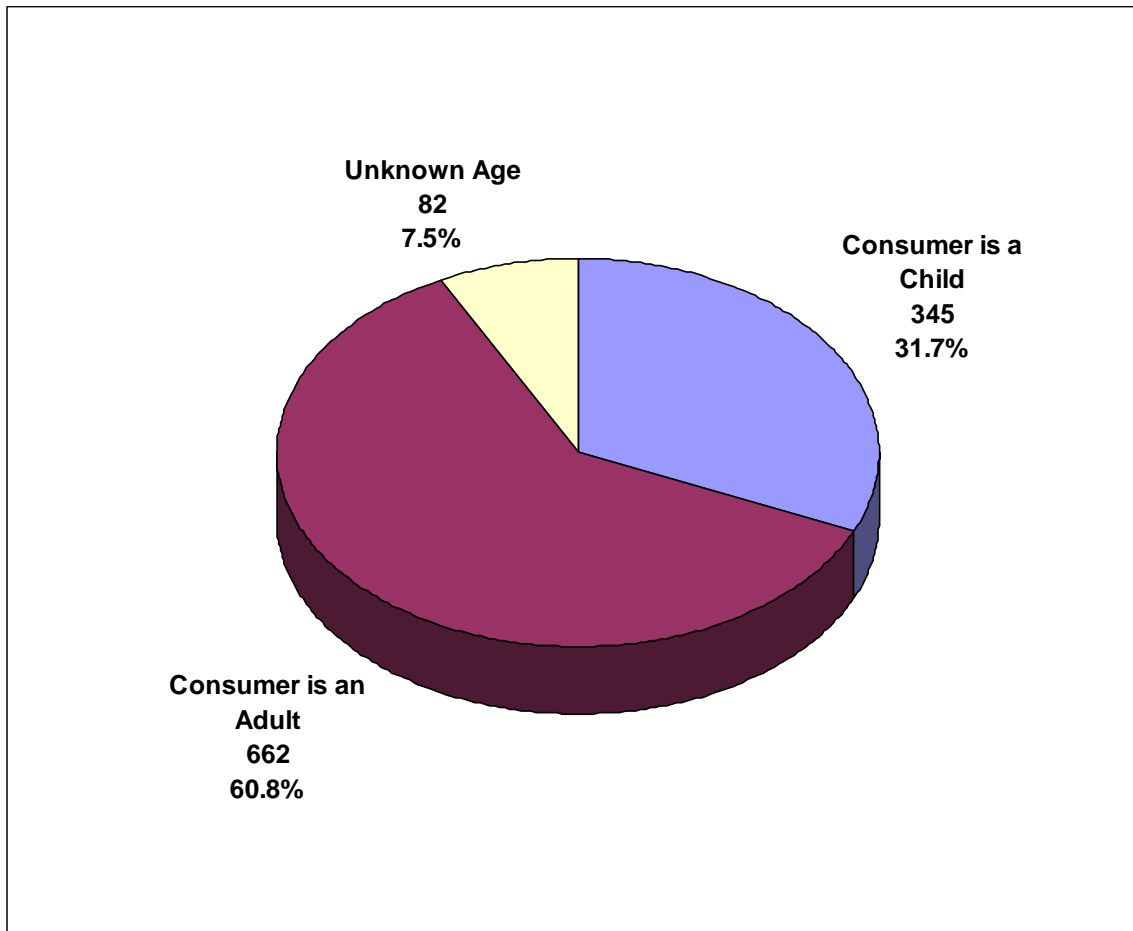
Complaint Source

Consumers (325) and parents/guardians (318) each made 24% of the complaints to LMEs this quarter. Two hundred and twenty nine (17%) of the complaints were initiated by providers. One hundred and eight (8%) were made by family members, 90 (7%) were made by anonymous persons and 76 (6%) were made by LME staff. The chart below illustrates the remaining contact sources for this quarter.



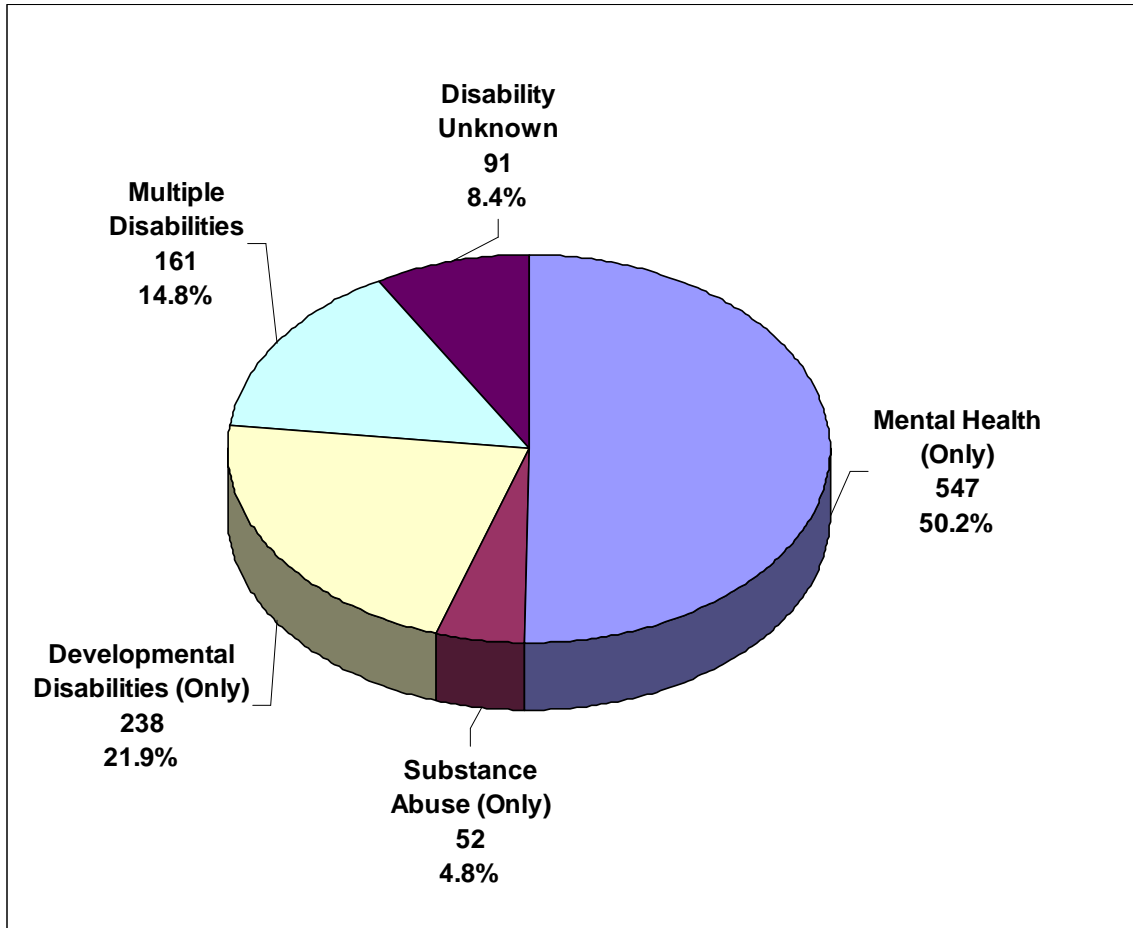
Complaints By Or On Behalf of a Consumer:
Consumer's Age Group

Statewide, 1,089 complaints were received by or on behalf of a consumer from July 1, 2008 to September 30, 2008. Six hundred and sixty two (61%) were by or on behalf of an adult (age 18 or over), 345 (32%) were by or on behalf of a child (age 0-17) and for 82 (7%) the consumer's age was unknown.



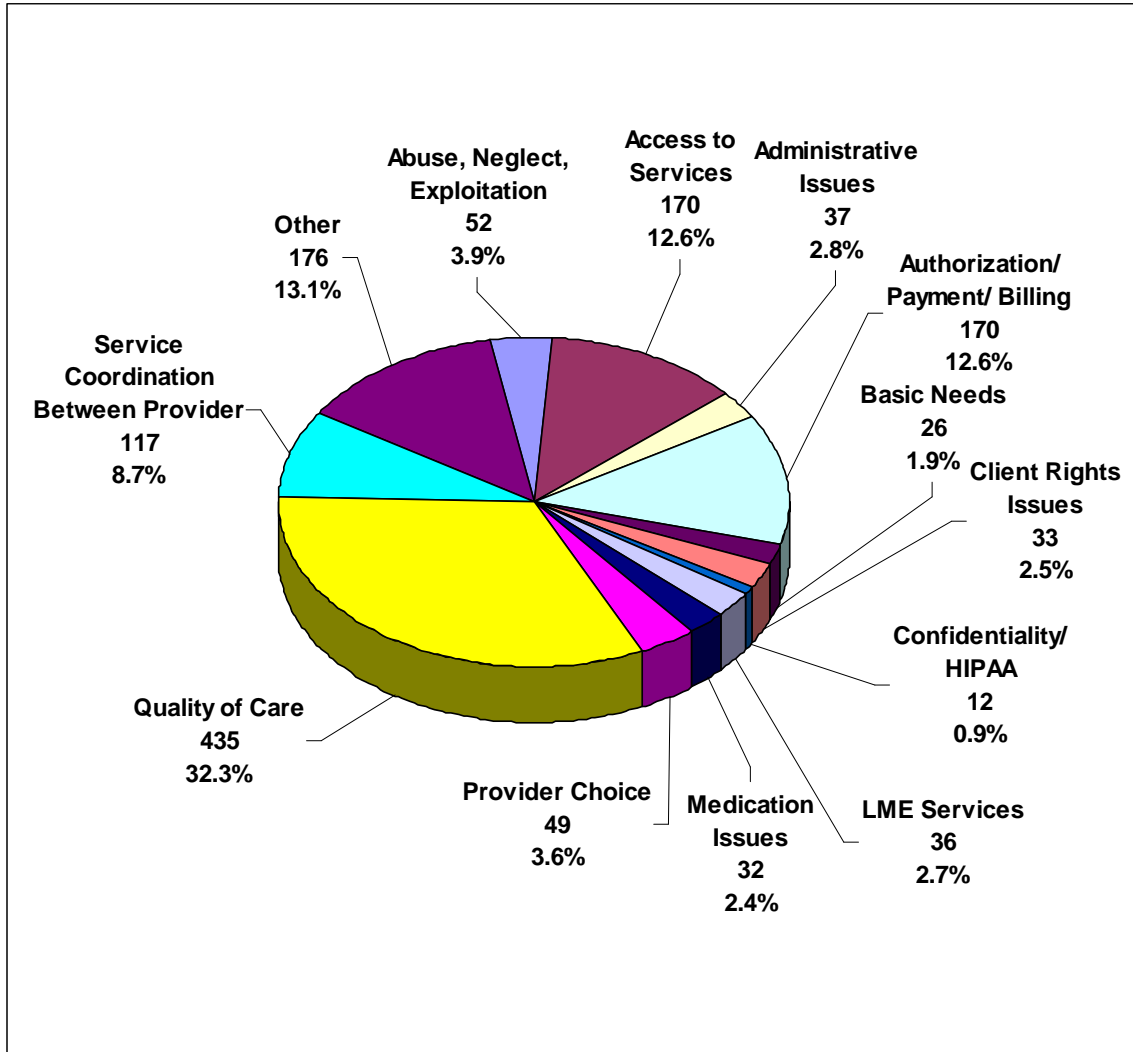
Complaints By Or On Behalf of a Consumer:
Consumer's Disability Group

Five hundred and forty seven (50%) of the complaints involved a consumer who had a mental health diagnosis, 238 (22%) involved consumers who had a developmental disability diagnosis, 161 (15%) involved consumers who had multiple disabilities, 52 (5%) involved consumers who had a substance abuse diagnosis and for 91 (8%) of the consumers involved the disability was unknown.



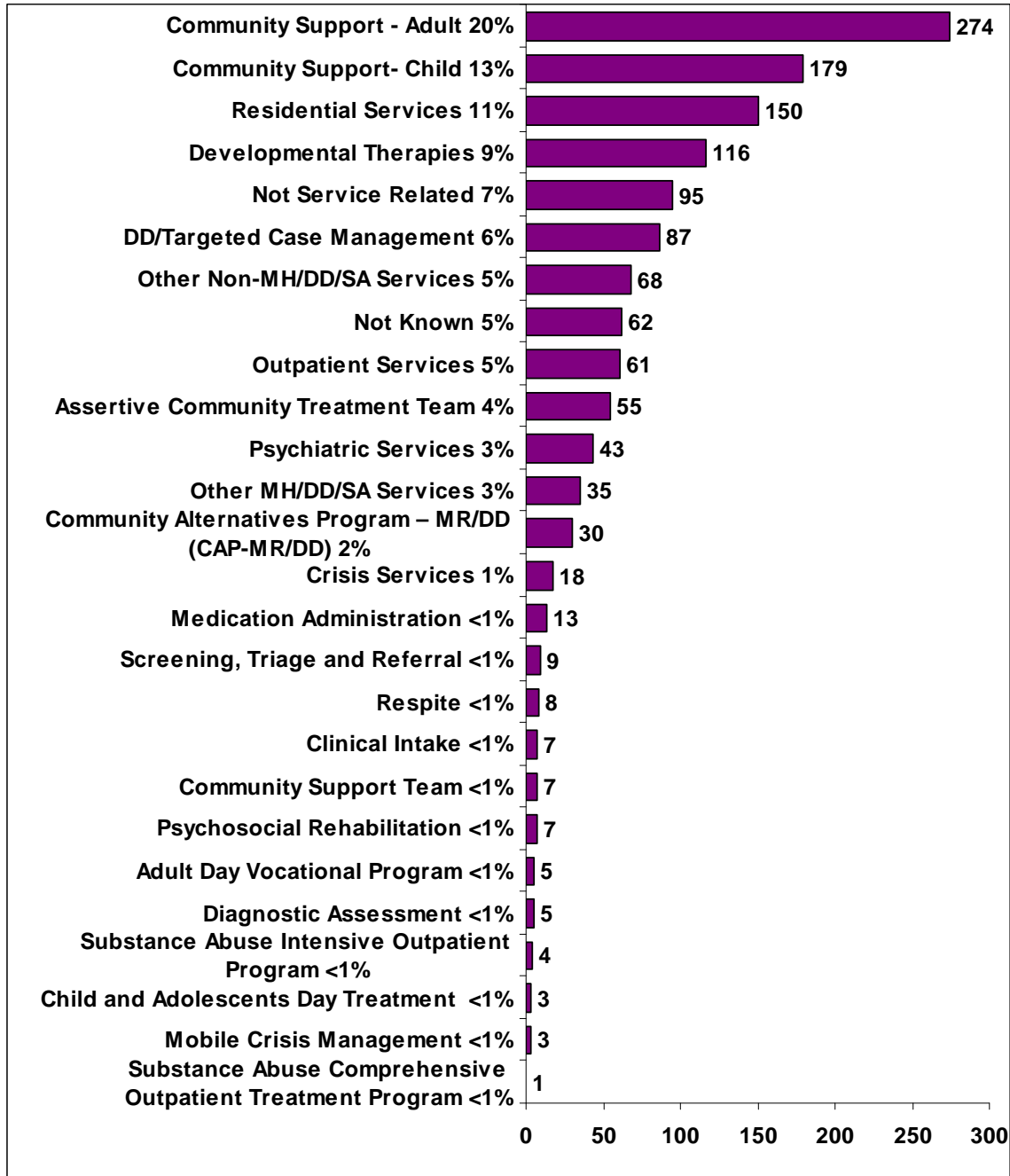
Primary Nature of the Complaint

The issues associated with the complaints are categorized in the graph below. Four hundred and thirty five (32%) of the complaints were related to quality of care issues, 170 (13%) to access to services, 170 (13%) to authorization/payment/billing and 117 (9%) to service coordination between providers.



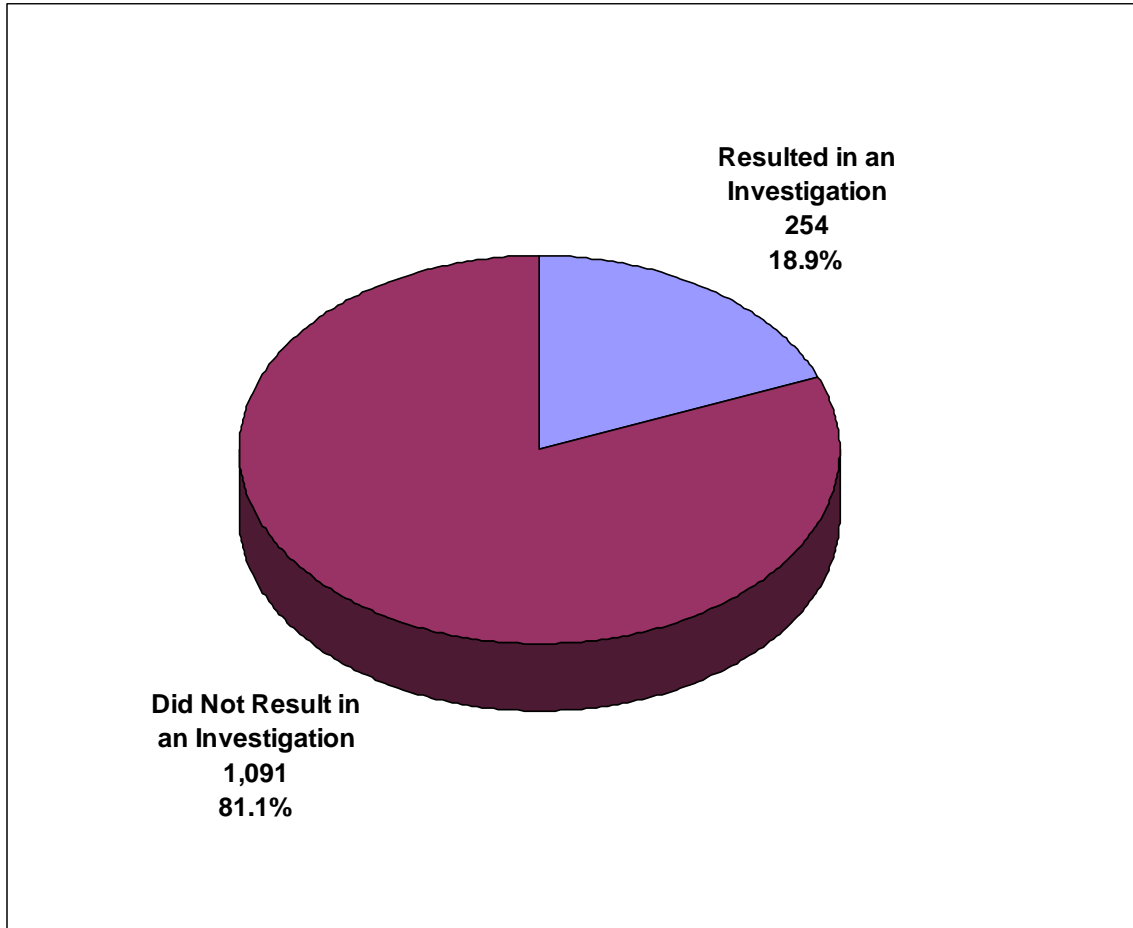
Type of Service Associated with the Complaints

Community Support (CS) services were associated with 453 (33%) of the total complaints this quarter with CS-Adult 274 (20%) and CS-Child 179 (13%) of the complaints. Residential services accounted for 150 (11%) and developmental therapies accounted for 116 (9%) of the total complaints.



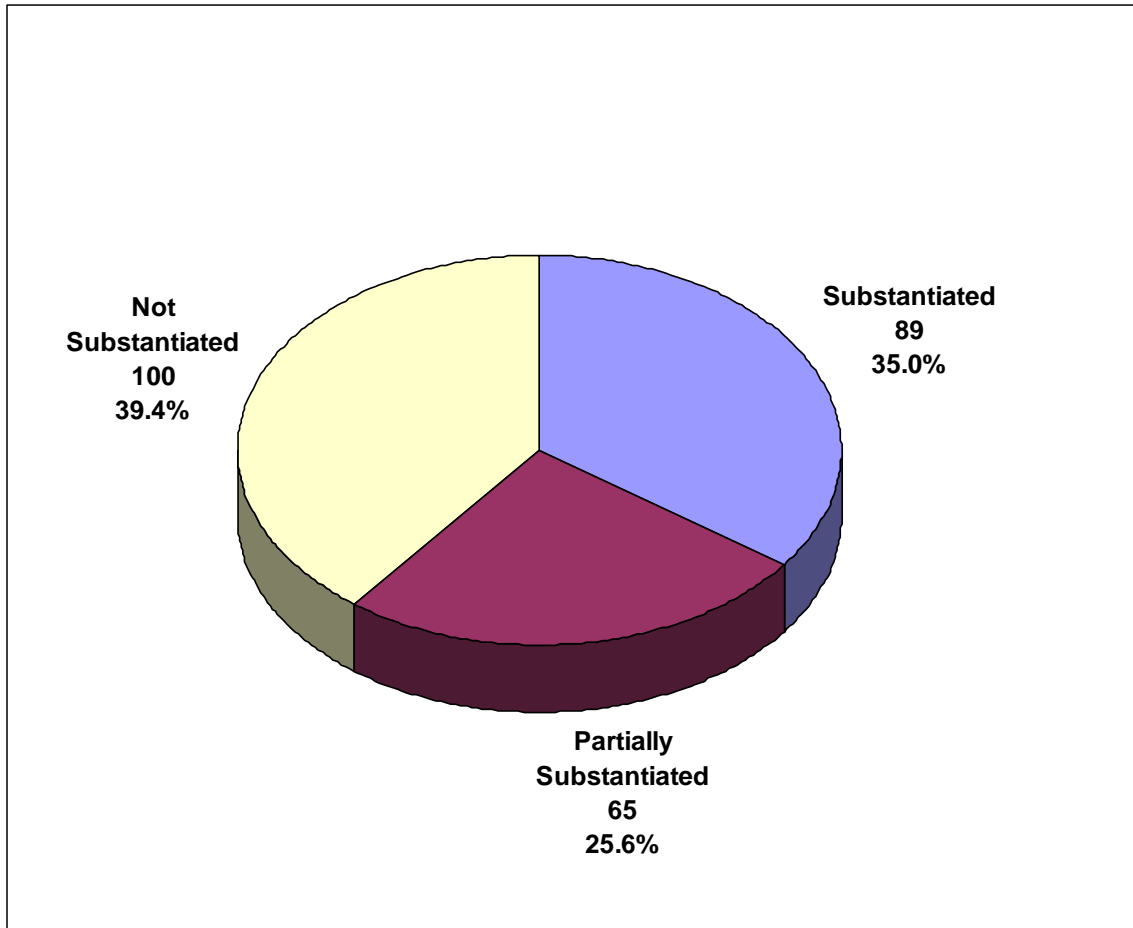
The Number of Complaints that Resulted in and Investigation

Statewide, LMEs received a total of 1,345 complaints from July 1, 2008 to September 30, 2008. Two hundred and fifty four (19%) complaints resulted in an investigation by the LME, DHSR, DSS or DMH/DD/SAS. The remaining 1,091 (81%) complaints did not result in an investigation.



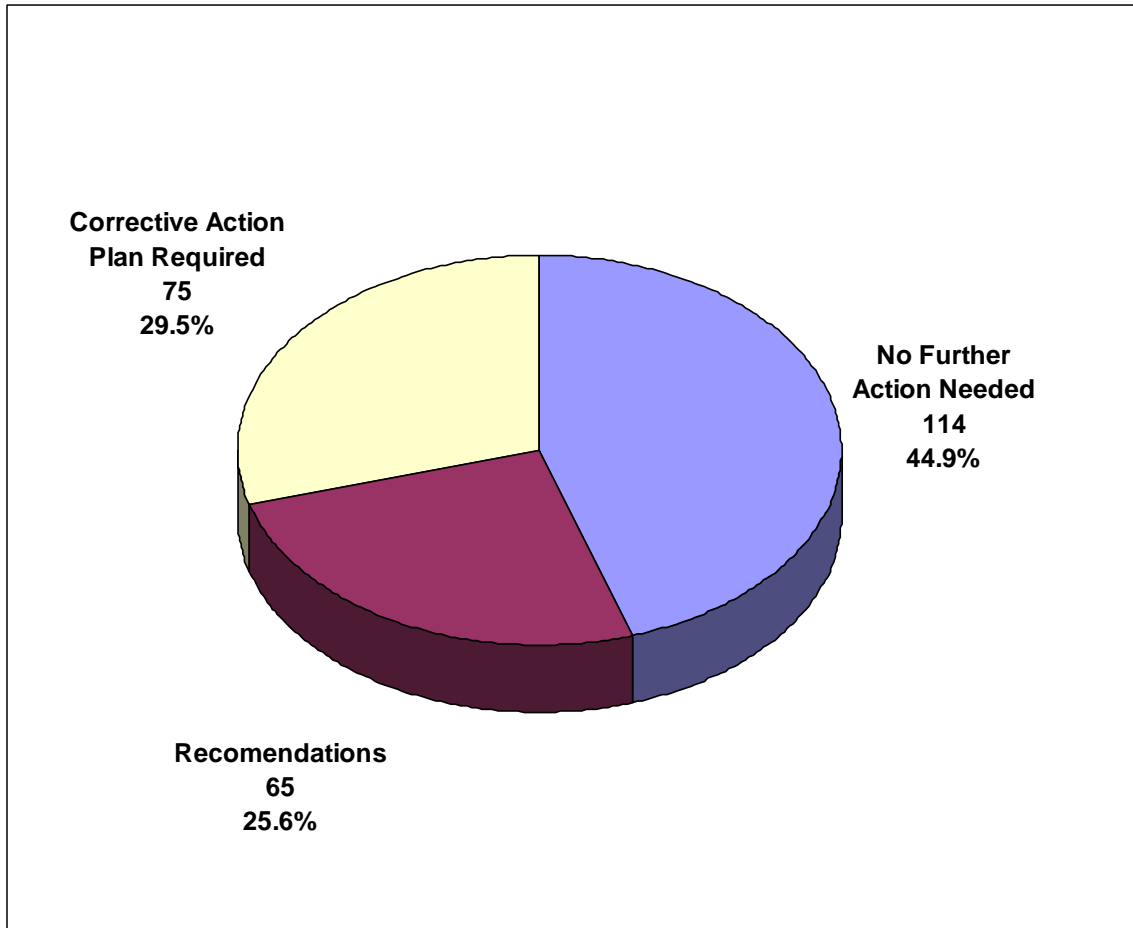
Complaint Investigation Results

Statewide, of the 254 complaints that were investigated during the first quarter, 100 (39%) were not substantiated, 89 (35%) were substantiated and 65 (25%) were partially substantiated.



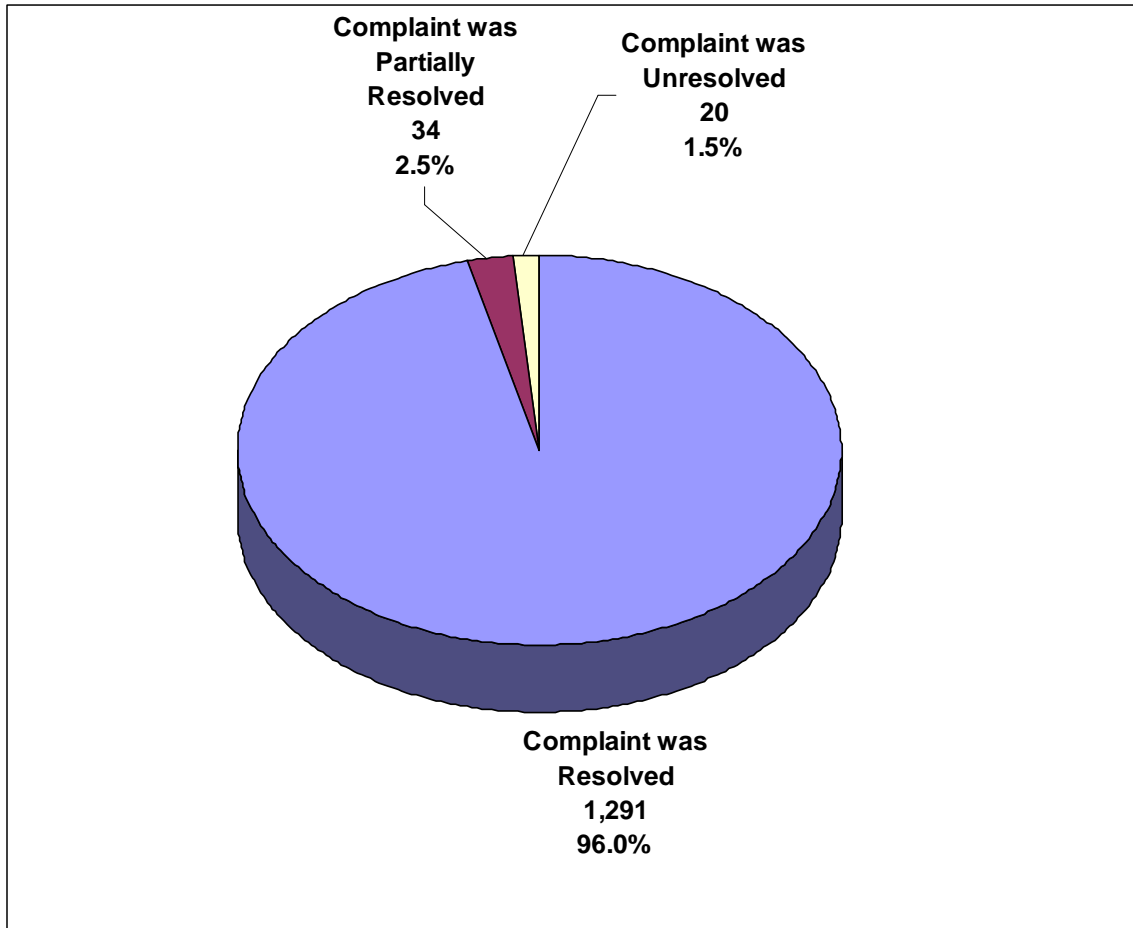
Actions Following the Investigations

During this quarter, 114 (44%) of the complaints investigated resulted in no further action needed. Seventy five (29%) of the complaint investigations resulted in a corrective action plan from the provider and 65 (26%) resulted in recommendations to the provider.



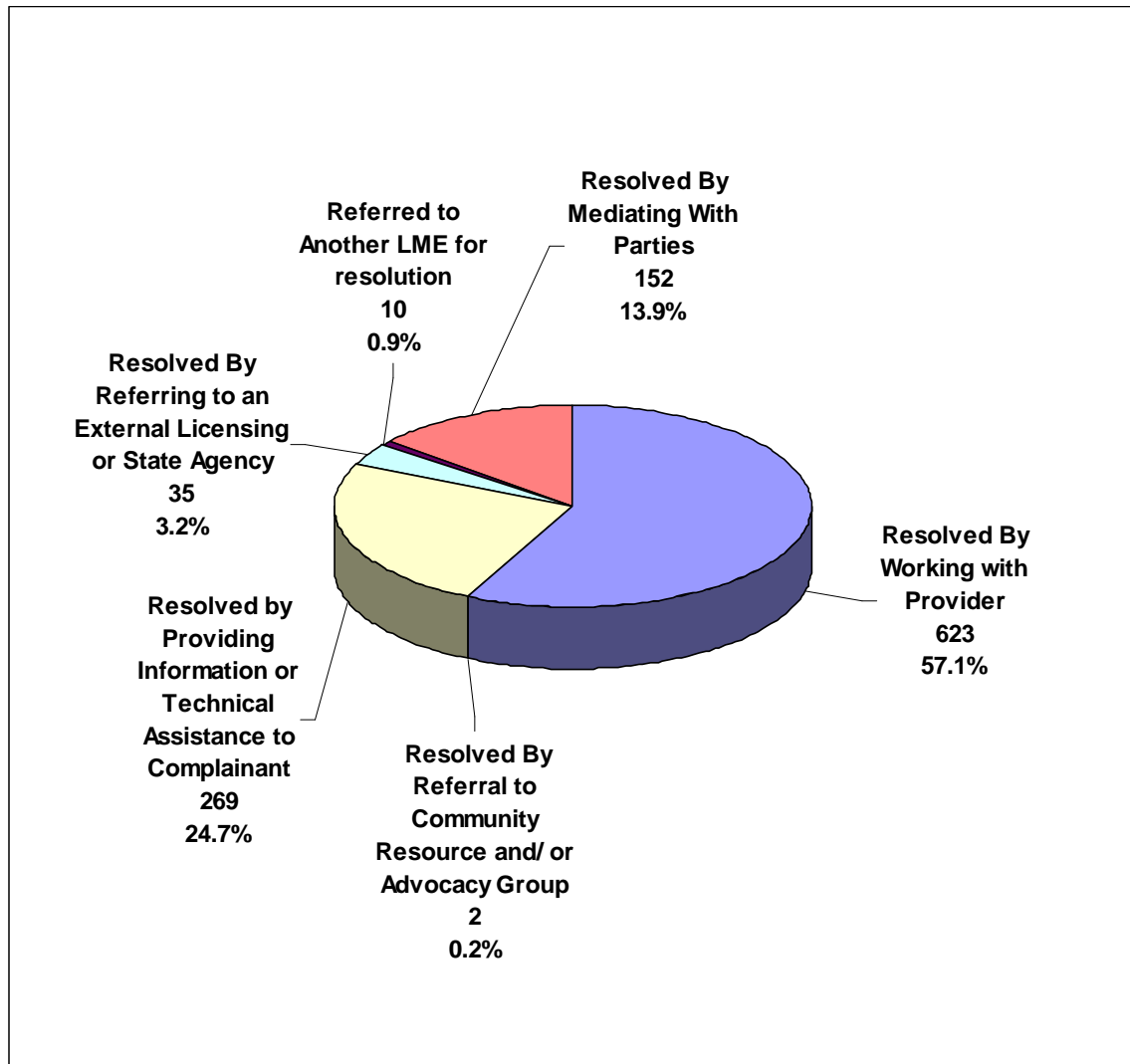
Final Disposition for all Complaints

Statewide, of the total number of complaints that were received by LMEs during this quarter, 1,291 (96%) were resolved, 34 (2%) were partially resolved and 20 (1%) were unresolved.



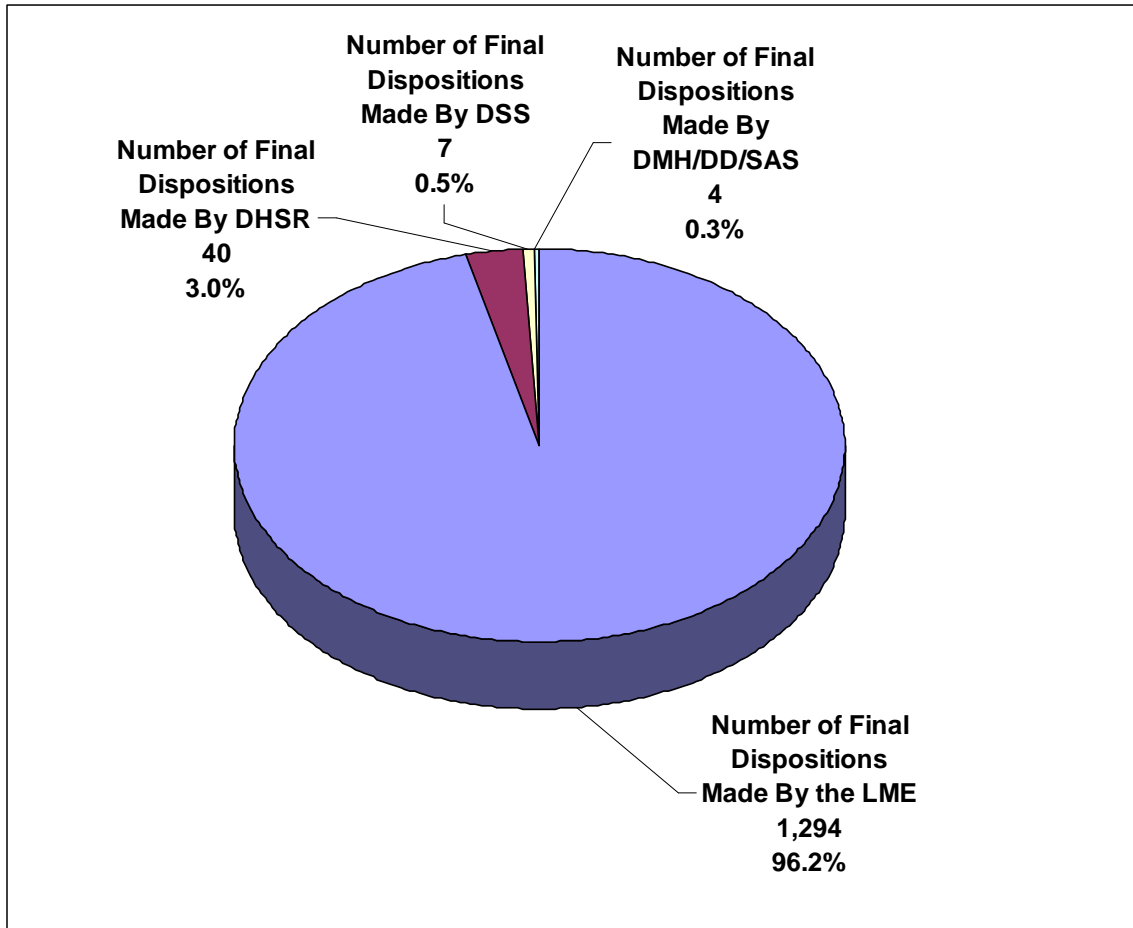
Resolution for Non-Investigated Complaints

One thousand and ninety one complaints during this quarter were resolved without an investigation. Most of these complaints, 623 or 57%, were resolved by working with the provider. Two hundred and sixty nine (24%) were resolved by providing technical assistance to the complainants, 152 (14%) were resolved by mediating with the parties and 35 (3%) were resolved by referring to an external licensing or state agency.



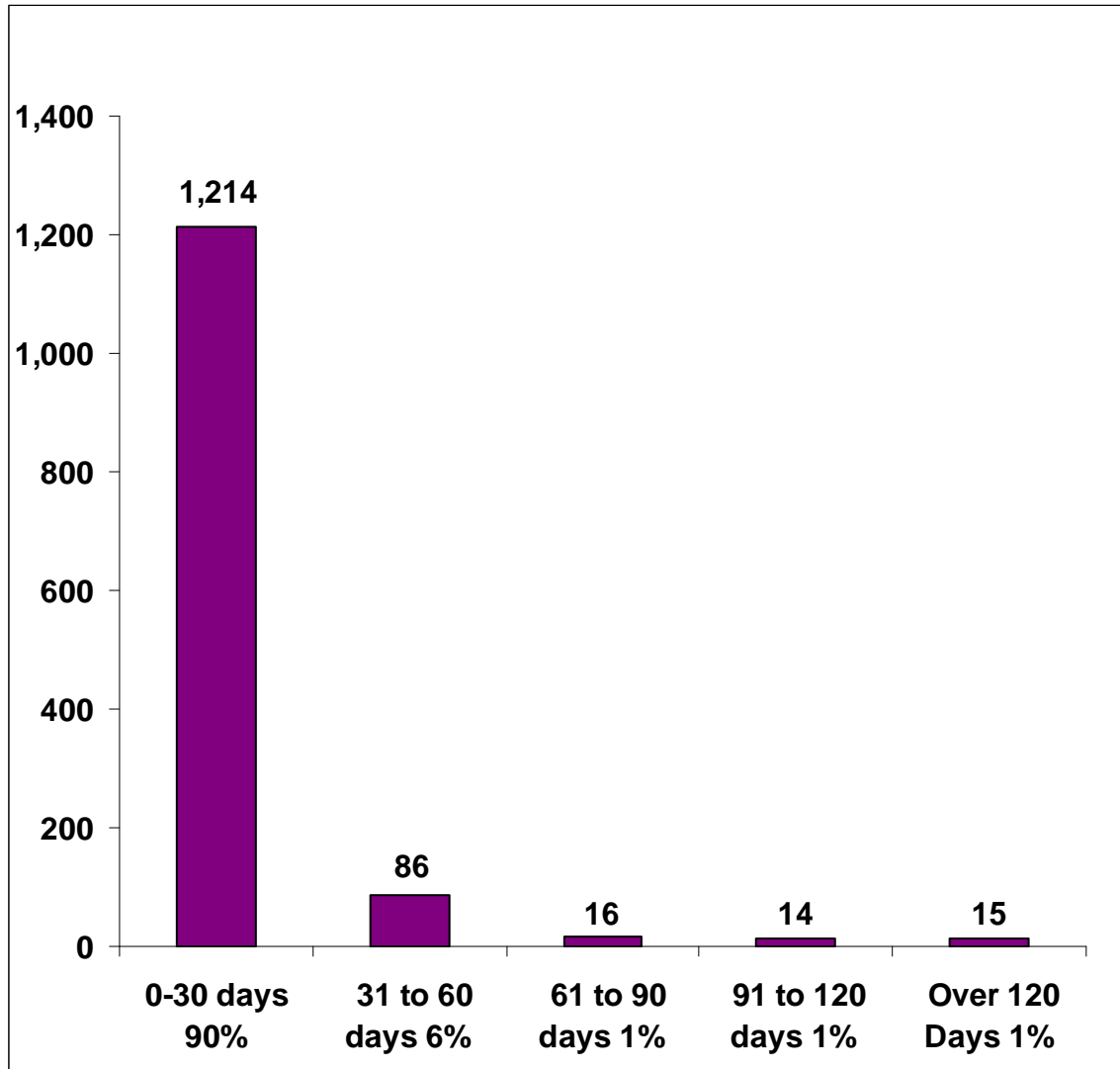
Final Disposition Authority for all Complaints

One thousand two hundred and ninety four (96%) of the final dispositions were made by the LME. Forty (3%) of the final dispositions were made by DHSR and less than one (1%) of the final dispositions were made by DSS and DMH/DD/SAS.



Number of Days to Resolution

One thousand two hundred and fourteen (90%) of the complaints received during this quarter were resolved within 30 days of receipt of the complaint. The majority of the complaints that required more than 30 days to resolve were reported to DMH/DD/SAS, DHSR, DSS or another licensing or state agency for investigation.³ Please note that 14 (1%) complaints are not included in this graph because they were referred to another regulatory agency for final disposition.



³ Data collection occurs during the quarter. However, data is submitted to DMH/DD/SAS 5 months after the end of the quarter to allow for complete resolution of all complaints. This provides an accurate picture of resolution and final disposition for all complaints initiated during the quarter.